

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000019768

FILED
Feb 28, 2005
Secretary of State**Entity Name:** BLUE MOON MOTORSPORTS, LLC**Current Principal Place of Business:**749 FLEET FINANCIAL COURT
#1005
LONGWOOD, FL 32750**New Principal Place of Business:****Current Mailing Address:**749 FLEET FINANCIAL COURT
#1005
LONGWOOD, FL 32750**New Mailing Address:****FEI Number:** 54-2067352**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KAMHI, ALBERT
3044 HARBOUR LANDING WAY
CASSELBERRY, FL 32707 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:Title: MGR () Delete
Name: KAMHI, ALBERT
Address: 3044 HARBOUR LANDING WAY
City-St-Zip: CASSELBERRY, FL 32707Title: MGR () Delete
Name: KAMHI, PATRICIA A
Address: 3044 HARBOUR LANDING WAY
City-St-Zip: CASSELBERRY, FL 32707Title: MGR (X) Delete
Name: BARRETT, WALTER
Address: 1120 BLACK ACRE COURT NORTH
City-St-Zip: WINTER SPRINGS, FL 32708Title: MGR () Delete
Name: LAVALLE, PEGGY A
Address: 642 BONIVIEW LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714Title: MGR () Delete
Name: BROWN, ROBERT D
Address: 5206 OAKDALE ROAD
City-St-Zip: HAINES CITY, FL 33844**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
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City-St-Zip:Title: () Change () Addition
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Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PEGGY A. LAVALLE

CFO

02/28/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date